

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>✓</i>	<i>00000</i>	<i>8/29/00</i>
O.I.P.E. CLASSIFIER		<i>2</i>	<i>4/3/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>M2</i>	<i>10303</i>	<i>3-28</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	
2	✓ ✓
3	✓ ✓
4	✓ ✓
5	✓
6	
7	✓ ✓
8	
9	✓ ✓
10	
11	N
12	N
13	
14	N
15	N
16	N
17	N
18	N
19	N
20	N
21	N
22	N
23	
24	✓ ✓
25	
26	✓
27	
28	
29	
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32	
33	
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35	
36	
37	✓
38	N
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50	✓

Claim	Date
Final	
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51	N
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE CO